

PART B - FEE(S) TRANSMITTAL

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7590

09/28/2011



Ansel M. Schwartz
 One Sterling Plaza
 Suite 304
 201 N. Craig Street
 Pittsburgh, PA 15213

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| | |
|------------------------|--------------------|
| Tracey L. Klaas | (Depositor's name) |
| <i>Tracey L. Klaas</i> | (Signature) |
| December 19, 2011 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/718,008 | 11/21/2000 | Kenneth Perlin | KPER-4 | 9323 |

TITLE OF INVENTION: METHOD AND APPARATUS FOR NOISE

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|---------------|---------------------|----------------------|------------------|------------|
| nonprovisional | YES | \$870 | \$0 | \$0 | \$870 | 12/28/2011 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|-----------------|----------|----------------|
| WANG, JIN CHENG | 2628 | 345-581000 |

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|---------------------------------------|
| 12/27/2011 MBELETE2 00000035 09718008 |
| 01 FC:2501 |
| 02 FC:8001 |
| 870.00 OP |
| 30.00 OP |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Ansel M. Schwartz

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-0737 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Ansel Schwartz

Typed or printed name Ansel M. Schwartz

Date 12/19/11

Registration No. 30,587

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1 Ansel M. Schwartz

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Typed or printed name Ansel M. Schwartz

Date 12/19/11

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